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# ***PROGRAM DESCRIPTION:***

**1110**

## **INTRODUCTION**

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### ***CONREP POLICY AND PROCEDURE MANUAL***

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#### ***ESTABLISHMENT OF CONREP***

##### **Overview**

The Forensic Conditional Release Program (CONREP) is the State Department of Mental Health's statewide system of community based treatment and supervision services for judicially committed patients and Mentally Disordered Offenders (MDO).

In 1984, legislation was enacted which established the Forensic Conditional Release Program (see following pages). The program was instituted on January 1, 1986 and is codified in Welfare and Institutions Code (WIC) Section 4360 (a) & (b).

##### **Program Mission**

The primary mission of the CONREP program is the protection of the public through the reduction, if not prevention of reoffense by specified forensic patients.

##### **Program Philosophy**

the program mission is accomplished by providing standardized, intensive out-patient mental health treatment, supervision and assessment services. The services provided are based upon individual treatment plans which are reviewed and updated annually.

Program emphasis on reoffense prevention is achieved through:

- \* An integrated system of community treatment services;
- \* Active case management;
- \* Treatment and rehabilitation of patients to enhance their competent functioning within society;
- \* Continuing clinical assessments of patients to evaluate effectiveness of treatment plan and treatment progress;

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### ***ESTABLISHMENT OF CONREP***

#### **Program Philosophy (cont.)**

- \* Rehospitalization and preventive revocation of outpatient status, when indicated; and
- \* Liaison with state hospitals, community agencies and outpatient programs for continuity of care.

#### **Target Population**

The target population consists of persons found to be:

- \* Not Guilty by Reason of Insanity (Penal Code [PC] Section 1026);
- \* Incompetent to Stand Trial (PC 1370);
- \* Mentally Disordered Offender (PC 2960 & PC 2970);
- \* Mentally Disordered Sex Offender, (former Welfare and Institutions Code [WIC} Section 6316);
- \* Sexually Violent Predator (WIC 6604); and/or
- \* Other patient populations for which DMH has direct responsibility, e.g. WIC 4360(a).

#### **Terms & Conditions of Outpatient Treatment**

All patients must agree to certain conditions of outpatient treatment and supervision. The individualized **Terms & Conditions of Outpatient Treatment (MH 7018)** is designed by the outpatient supervisor and approved by the committing court. This document includes court-sanctioned provisions for involuntary outpatient services.

#### **Core Treatment Standards**

The Forensic Conditional Release Program has core service standards which set minimum treatment levels. Patients may also require additional supplemental treatment services available in local community mental health programs.

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#### ***CONREP POLICY & PROCEDURE MANUAL***

##### **Prior Policy Publications**

During the early phases of program development, DMH policy regarding CONREP was sent to local community programs through general and numbered policy letters and Forensic Special Orders (FSO) (See manual **Section 1120: ROLES & RESPONSIBILITIES, Forensic Policy Dissemination**, for more information).

In addition, there were publications such as the *CONREP Contract Manual* and the *CONREP Operations Manual* which also contained policies and procedures relevant to program administration.

##### **Development of Manual**

As CONREP became operational, a comprehensive manual was developed to incorporate all aspects of program operation in one easily referenced document. All of the above documents became obsolete when the policies and procedures contained in them were revised and incorporated into the two volume **CONREP POLICY & PROCEDURE MANUAL** first distributed in May 1991.

##### **Authority**

This manual is issued through the authority of the Department of Mental Health in accordance with statutory language contained in WIC 4360(a) & (b) and PC 1615. **All contractors and employees shall abide by the policies and procedures delineated in this manual.**

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#### **Two Volume System**

The manual is divided into two volumes, in separate binders, representing distinct aspects of the program. **VOLUME I: PROGRAM SERVICES** contains information related to clinical and program service concerns. The original sections are dated January 1991. (See Update Log in Appendices for subsequent additions and revisions.)

**VOLUME II: FISCAL AND DATA ADMINISTRATION** contains all information and administrative policy related to fiscal and data matters. The original sections are dated October 1992. (See Update Log in Appendices for subsequent additions and revisions.)

#### **Manual Structure**

Each volume binder is divided into chapters and sections within each chapter. Volume I is Series 1000 and Volume II is Series 2000. Chapters are numbered as 1100, 1200, 1300, 2100, 2200, 2300, etc. Sections within each chapter are similarly numbered. For example, sections under Chapter 1100 are numbered 1110 and 1120; sections under Chapter 2100 are numbered 2110, 2120, etc.

Each manual also contains a **Table of Contents** and detailed individual **Section Contents** outlines on blue paper to help easily identify and locate material. Each volume also contains a **Glossary** and **Update Log**, as well as relevant **Appendices**.

#### **CONREP Forms**

Volume II: Fiscal & Data Administration includes a section titled, **CONREP Forms**. This section contains a list of all forms referenced in the manual and used by CONREP programs. A sample copy of each form is also included.

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##### **Page Numbers and Dates**

Each manual page is numbered on the outside bottom corner according to its section number, followed by the correct sequential number. Also, the inside bottom corner of each page also contains a date which identifies the effective date (although the actual mailing may have been subsequent to this date). All revisions to manual sections contain an effective date, so that updated material can be readily identified.

##### **Name Changes and Glossary**

Throughout the course of the development and operation of the CONREP program, the Department of Mental Health and the Forensic Services unit have undergone a number of reorganizations and name changes. Various manual sections may contain organizational references (e.g. Regional Forensic Coordinator) which are no longer current, though the function and policy remain in effect. A **Glossary** has been included with each volume of the manual which contains all referenced organizational terms and their current equivalent. Other programmatic terms are also defined for the readers' information.

##### **Revisions and Additions**

Material contained in the manual is subject to ongoing revision as necessary for the program's continuing operation and evolution. New and revised manual contents are disseminated to holders of the manual via a numbered Forensic Information Letter (FIL) indicating the content of the changes with accompanying directions on removal and addition of specified pages.

##### **Update Log**

An Update Log which summarizes all manual revisions and additions by section, page number and page date is distributed periodically. Manual holders are responsible for making sure their manuals are maintained according to this log.

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#### ***CONREP ADMINISTRATION***

##### **Service Contracts**

The Department of Mental Health contracts with county programs willing to provide relevant services for a reasonable cost. In those counties where there is no contract with the county mental health departments, the State contracts directly with private agencies or providers to provide the services within those communities.

##### **State Operated Program**

The State may operate its own program in a specific region. Usually this occurs when the State fails to negotiate a contract with a suitable public or private provider.

##### **Funding**

The Department of Mental Health funds a local services system to assure a dedicated staffing capacity to provide core treatment services. A Net Negotiated Amount (NNA) contract provides a minimum level of funding appropriate to the anticipated caseload.

Certain other supplemental services may be provided to specific patients and are reimbursed by a Net Negotiated Rate (NNR) contract. All services are 100% reimbursable by the State with no local funding match required.



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#### ***HISTORICAL PERSPECTIVE***

##### **Previous Efforts**

The Forensic Conditional Release Program is the culmination of the Department of Mental Health's long history of involvement with, and development of, comprehensive community outpatient treatment programs for judicially committed mentally disabled patients.

##### **Past State Hospital Commitments**

For many years, only those individuals declared Not Guilty by Reason of Insanity (PC 1026), who were committed to a state hospital, could later be released into the community. There was no court involvement. The conditions of release and parole were the responsibility of the state hospital director. These persons were then monitored by the State Bureau of Social Work.

##### **AB 1229**

The early 1970's saw several legislative attempts to expand services to judicially committed patients and increased attention on mentally ill persons detained in jails and prisons. This legislative effort culminated in 1976 and became known as AB 1229 (Lanterman). This statute provided for treatment in the local community for the judicially committed patient in three categories:

- \* PC 1370 - Incompetent to Stand Trial;
- \* PC 1026 - Not Guilty by Reason of Insanity;
- \* WIC 6316 - Mentally Disordered Sex Offender.

##### **Establishment of PC 1600**

In January 1981, all outpatient treatment and supervision services for judicially committed patients were codified under Penal Code Section 1600. This section contains the conditions and procedures by which judicially committed patients may be placed on outpatient status by the court.

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### ***HISTORICAL PERSPECTIVE***

#### **Mentally Disordered Sex Offender (MDSO)**

The MDSO statutes were repealed effective January 1, 1982. However, all of those patients who remained in state hospitals or who committed their offenses prior to 1982 are still eligible for outpatient treatment and supervision services under PC 1600. CONREP continues to provide services to those eligible under this provision.

#### **CONREP Legislation**

The Governor's Mental Health Initiative (AB 2381, Mojonnier; Chapter 1327, Statutes of 1984) mandated responsibility for community supervision and treatment of judicially committed patients from all counties to the State Department of Mental Health.

A second bill (AB 1984, Mello; Chapter 1488, Statutes of 1984) specified that a person adjudicated Not Guilty by Reason of Insanity (PC 1026) must have completed at least one year of community treatment and supervision before a court may determine that the person is restored to sanity.

#### **MDO Program [PC 2960]**

The Mentally Disordered Offender (MDO) Program was established in July 1986. Legislation (Chapter 1419, Statutes of 1985, and Chapter 368, Statutes of 1986) was enacted and codified in Penal Code Section 2960 et seq.

The Department (DMH) was mandated to provide treatment for parolees who meet the specific criteria of a Mentally Disordered Offender. Inpatient treatment occurs in specific state hospitals. Outpatient treatment is provided by the CONREP program. The MDO program was temporarily suspended in February 1989, due to an appellate court decision. Following the enactment of new legislation, the program was reestablished in August 1989. (See Section **1240: MENTALLY DISORDERED OFFENDER** for more information.)

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#### ***HISTORICAL PERSPECTIVE***

##### **Sex Offender Commitment Program (WIC 6600)**

The Sex Offender Commitment Program (SOCP) was established by legislation (Chapter 763, Statutes of 1995), codified in Welfare and Institutions Code (WIC) Sections 6600 et seq. and became effective on January 1, 1996. This law provides for a civil commitment process for persons who, upon release from prison, meet specified criteria as Sexually Violent Predators. The criteria include a diagnosed mental disorder and a likelihood of reoffense.

If they meet the criteria, the superior court commits them to a treatment program under the jurisdiction of the state Department of Mental Health for a period of two years. Inpatient treatment occurs in designated state hospitals. Outpatient treatment is provided by the CONREP program. (For more information, see **Section 1250: SEX OFFENDER COMMITMENT PROGRAM.**)